

HAWAII EMPLOYER-UNION HEALTH BENEFITS TRUST FUND
COBRA ACTIVE EMPLOYEES
ALL BU'S EXCEPT BU12
HSTA VEBA ACTIVE EMPLOYEES WHO OPT TO TRANSFER TO EUTF PLANS (BU 05,45)
BU 05, 45 EMPLOYEES HIRED ON OR AFTER JANUARY 1, 2011

EFFECTIVE MARCH 1, 2012

Benefit Plan	Type of Enrollment	Total COBRA Premium
MEDICAL PLANS		
PPO - 90/10 Plan - HMSA Medical	Self	\$348.37
	Two-Party	\$845.64
	Family	\$1,078.43
PPO - 80/20 Plan - HMSA Medical	Self	\$332.42
	Two-Party	\$806.90
	Family	\$1,029.04
**Prescription Drug	Self	\$62.02
	Two-Party	\$150.72
	Family	\$192.05
HMO - HMSA Medical	Self	\$388.64
	Two-Party	\$943.44
	Family	\$1,203.15
**EUTF HMO Prescription Drug	Self	\$68.99
	Two-Party	\$167.69
	Family	\$213.63
HMO - Kaiser Comprehensive Medical Kaiser Prescription Drug	Self	\$439.33
	Two-Party	\$1,067.53
	Family	\$1,361.90
HMO - Kaiser Basic Medical Kaiser Prescription Drug	Self	\$382.87
	Two-Party	\$930.28
	Family	\$1,186.79
Supplemental - HMSA Medical HMSA Supplemental Prescription Drug	Self	\$209.04
	Two-Party	\$507.61
	Family	\$647.21
Supplemental - Royal State National Supplemental Prescription Drug	Self	\$40.12
	Two-Party	\$100.30
	Family	\$111.63
High Deductible Health Plan - HMSA HMSA Prescription Drug	Self	\$346.43
	Two-Party	\$840.93
	Family	\$1,072.45
DENTAL PLAN		
HDS Dental	Self	\$29.42
	Two-Party	\$58.83
	Family	\$96.78
VISION PLAN		
VSP Vision	Self	\$6.08
	Two-Party	\$11.26
	Family	\$14.71
CHIROPRACTIC		
Royal State National Chiropractic	Self	\$1.37
	Two-Party	\$2.75
	Family	\$2.91

****The prescription drug rates are subject to increase depending on the outcome of the protest/appeal.**